

Shut out of medicine in Canada, Dr. Leonora Howard King blazed a trail in China

Margaret Negodaeff-Tomsik

In Brief • En bref

After being denied the opportunity to study medicine and work at home, Dr. Leonora Howard King became Canada's first female medical missionary to China. Although she attempted to wear both the religious and secular hats handed her by the Women's Foreign Missionary Society, Howard King found that she was too busy meeting the medical needs of destitute women and children to proselytize. She won the favour of Chinese royalty, and after treating hundreds of wounded soldiers during the 1894-95 war with Japan became the first Western woman to become a mandarin, an honour bestowed by her adopted country.

Après s'être vu refuser la possibilité d'étudier la médecine et de travailler dans son pays, le Dr Leonora Howard King est devenue la première femme médecin du Canada à agir comme missionnaire en Chine. Même si elle a essayé de porter les chapeaux religieux et laïque que lui ont confiés la Société pour les missions étrangères, le Dr Howard King a constaté qu'elle était trop occupée à répondre aux besoins médicaux des femmes et des enfants dépourvus pour faire du prosélytisme. Elle a obtenu la faveur de la cour royale de Chine et, après avoir traité des centaines de soldats blessés au cours de la guerre de 1894-1895 contre le Japon, elle fut la première occidentale à devenir mandarin, honneur que lui a conféré son pays d'adoption.

In the 19th century thousands of Westerners travelled to China to spread the Christian gospel. Many were motivated by simple goodness, while some saw fantastic opportunities for wealth and adventure. A few were successful and their legacies flourish today; others were killed or tortured, died of fever, or were ordered home for their own good. Few books have been written about medical missionaries, fewer still about the hundreds who were women. One, whose skill as a physician was surpassed only by her will to survive and to remain behind after her peers had fled, was Dr.

Leonora Howard King (1851-1925). She was the second woman, and the first Canadian woman, to practise medicine in China.

Leonora Howard, whose grandfather and uncle were physicians, had taught school in her hometown of Farmersville, Ont. (now Athens), but wanted more from life. Denied entrance to medical school in Canada because of her sex, she turned to the United States and was accepted by the University of Michigan's Women's Medical College in 1872.

Leonora Howard's professors, who had decided to admit women in 1870, believed that "woman is during a large fraction of each month a quasi-invalid, that her mental and moral manifestations are seriously perturbed at such times . . . that childbearing must inca-

pacitate her during a large part of the period of *utero* gestation . . ." and finally, that "foeticide and infanticide, already alarmingly frequent," would become an even greater problem. The men finally agreed to teach medicine to women for an extra \$500, per professor, per year.

Amanda Sanford, the first woman to earn her medical degree at the University of Michigan, had paved a rocky way for Leonora Howard. A handsome woman with large, friendly eyes and an intelligent face, Amanda graduated with honours in 1871. She received her degree at the university chapel amid a chorus of hoots and jeers and showers of abusive notes.¹

The university was run by James Burritt Angell, who had agreed to accept women on the strong assurance that those entering the school would not prove "troublesome." Howard herself was neither troublesome nor outstanding, for she is mentioned only in the university's official roll call as 1 of 39 female students; there were 275 male students. (Things would change dramatically 4 years later when Angell, then ambassador to China, was told that the success of his important Sino-American treaty should be credited to a slip of a Canadian spinster — Dr. Leonora Howard.)

Although middle class in upbringing, Howard was said to be poor and "denied herself many of the comforts of life rather than make her wants known," even to her family. She finally came to the attention of a powerful new group called the Woman's Foreign Missionary Society (WFMS), part of the American Methodist Epis-

Margaret Negodaeff-Tomsik, a freelance writer living in Ottawa, intends to publish the biography of Dr. Leonora Howard King.

copal Missionary Society, which adopted her in return for paying the last year of her tuition. Howard repeatedly mentioned her disappointment at not being allowed to study in Canada² or work with Canadian missionaries overseas, but Canada's official presence in China would not begin until 1892.

Female missionaries like Howard were from devout rural families³ and many had worked as teachers. Some had passed the "marriageable age"; at the time, professional women were considered eccentric, if not downright unacceptable. Because Howard had grown up with more freedom than her urban sisters, the constraints that came with being a woman in 19th-century Canada must have been difficult to accept. Medicine and travel offered exciting and rewarding alternatives.

The world missionary enterprise, though hardly feminist, had an enormous impact on society because women played almost as large a role as men. In most "heathen" countries — the South Seas being a vivid exception — women were confined in purdah and could only be reached by other women.

Florence Nightingale's crusade in the Crimea and "women's work" during the American Civil War had convinced even diehard male-run missionary boards that women could do valuable work — in particular, their capacity for fund-raising was astounding.

At the time the Methodist Church was the largest single Protestant denomination in the US, with some 4.7 million members, 25 000 churches and 16 500 pastors. India aside, since 1847 China had seen the largest Methodist missionary effort, accounting for one-third of its world missionary force and \$4.5 million in property. To support the enterprise, adherents contributed about \$500 000 a year for missionary upkeep and work, to which was added WFMS support of unmarried women like Leonora Howard.⁴

Howard's teaching and medical knowledge were very desirable com-

modities, and at 26 she was just the right age: a candidate for missionary work could not be younger than 22 or older than 30. A younger woman might change her mind, not possess the academic credentials or fail to realize the ramifications of her decision. Women over 30 might not have the physical stamina required for the



Dr. Leonora Howard King

work and could become a "nuisance" by questioning and even rebelling against decisions made at home.

Leonora Howard graduated with honours in 1876, and collected "\$200 for personal outfit . . . and \$100 for the furnishings of the Home." According to the society's annual reports, the latter would remain the property of the WFMS. Her yearly salary, which would pay for food, lodging, clothing and travel in the field, was \$350. In April 1877 she set sail for Peking, where she would for a short time join American Dr. Lucy Coombs, the first female physician in China. Howard had the bad luck to arrive immediately after a huge flood had produced a tragic famine and widespread disease.

Medical missionary work, then fairly new, was seen as exemplifying Christ's selfless work among the sick and maimed; more pragmatically, it was considered an almost foolproof

channel through which to reach "the heathen." For the first few years in China Howard attempted to wear both religious and secular hats; like other physicians who followed, she quickly became too busy to proselytize.

Conditions in China in the 19th century resembled those in England in the 17th century. While washing one's hands was de rigueur by this time, Howard would practise without using antiseptics until well into the 1880s. At that time, faced with a total lack of hygiene, Howard may have been one of the first Canadians to accept the use of carbolic acid.

There was no shortage of patients. Destitute women and female children, despised for their lack of worth, travelled hundreds of miles, many on bound feet, just to see someone who actually cared about them. The most common ailments, apart from diseases and viruses, were gangrene from too-tight foot bandages, blindness incurred while stoking fires, cataracts and attempted suicide (usually an opium overdose) caused by maltreatment at the hands of in-laws. Little girls were often sold into prostitution and deliberately blinded. Many children contracted syphilis.

Given the existence of centuries-old Chinese herbal medicine, doctors like Howard might have expected to encounter difficulty in convincing people to submit to Western medicine. However, medical missionaries were hailed not for their expertise in administering drugs but for surgical techniques, including cataract removal, that were unknown in China.

Besides septicemia, Howard treated ague (malaria), cholera, tuberculosis, quinsy (acute tonsillitis), dyspepsia (indigestion, which might have been caused by ulcers or stomach cancer), diarrhea and black vomit (yellow fever). In China, the use of "night soil" — human feces — for fertilizer would produce cholera epidemics well into the next century. Still, in letters home many Westerners would write that the Chinese were remarkably healthy considering the filth that surrounded them. One

reason could be that they knew something the Westerners didn't: for the most part, they boiled every drop of water they drank.

In 1879 Howard travelled to Tientsin (now Tianjin) to attend the ailing wife of China's greatest viceroy, Li Hung-chang (Li Hongzhang). She was subsequently asked to stay in that city, and the vicereine gave her part of a temple to use for treating women and children. The other half was used by Dr. Kenneth Mackenzie of the London Missionary Society (LMS), who treated men and boys. The WFMS then found \$5000 to build Howard a proper hospital, which became the Isabella Fisher Memorial Hospital for Women and Children.

In 1884 Howard married Alexander King of the LMS and left her hospital to the care of an American, Dr. E. Akers, who would soon be followed by many other female physicians. As a private patron Lady Li built Leonora both a medical school for mission-educated Chinese women and children, and another hospital — still standing — which became known as the Government Hospital for Women and Children. A short time later Li Hung-chang's mother died and became the first Chinese to bequeath money (\$1000) to the cause of Western medicine.

During the 1894-95 war with Japan, Howard King, now 44, treated hundreds of wounded and dying Chinese soldiers. In recognition of her efforts the Empress Dowager T'zu Hsi awarded her the Order of the Double Dragon, an honour similar to a knighthood. Shy, plain Leonora Howard King of Athens, Ont., had become the first Western woman to become a mandarin.

What if she had stayed in Canada as she wished? Even if Canadian medicine had been more welcoming, she would never have touched as many lives as she did in China. Had she not been in Peking when the vicereine was dying, Li Hung-chang might have turned his back on Western medicine. Had she not started the first hospitals for women and

WOMEN WHO WANTED TO PRACTISE MEDICINE HAD TOUGH ROW TO HOE IN EARLY CANADA

The first woman to practise medicine in Canada had, in fact, practised as a man. In 1857 Dr. James (Miranda) Stuart Barry, a British Army medical officer, became inspector-general of hospitals for Upper and Lower Canada. "James" had already rectified appalling conditions in leper colonies and the equally sorry lot of regular army troops in South Africa, where soldiers' mortality rate from disease was double that of civilians. Her sweeping reforms helped change the face of the medicine that Howard would study, forever and for the better.

The first woman to practise in Canada as a woman, Dr. Emily Howard Jennings Stowe, also studied in the US, where British-born Dr. Elizabeth Blackwell, the first woman physician, had graduated in 1849. In 1867 Stowe returned to Canada with her degree and began to practise illegally. Two years later Parliament

brought in regular licensing laws and appointed a Council of the College of Physicians and Surgeons as sole licensing board for Ontario. Stowe applied for registration and was refused, because the act was carefully worded to bar women from practising, even if their qualifications were recognized elsewhere.

By the time Leonora Howard graduated from the University of Michigan in 1876, the Toronto School of Medicine had finally allowed Emily Stowe and Jennie Trout (who had graduated from the Women's Medical College of Pennsylvania in 1872), to attend lectures, provided they made "no fuss." Stowe, an ardent suffragette, made a great deal of fuss and was denied a medical licence for years (see Hacker C: *The Indomitable Lady Doctors*, Federation of Medical Women of Canada, Ottawa, 1984); Trout behaved "like a lady" and was granted her licence.

children, years might have passed before Chinese women would begin to study medicine. And had she left China during the various wars, she would certainly not have become Canada's first mandarin. Finally, it should be noted that the first Chinese women to study medicine in the West — their "missionary names" were Mary Stone and Ida Kahn — graduated from Howard King's alma mater, the University of Michigan, and would open their own women's institutions in China.

Against orders from the home office, Leonora stayed in China through many more wars, including the famous Boxer rebellion of 1900, 10 unsuccessful attempts at revolution and the forced abdication of the last emperor, P'u Yi. A friend of both royalty and revolutionary, she travelled widely in China, attended medical courses in Europe and England,

and returned to Canada for only the second time in 1924. The *North China Daily Mail* noted: "At this time of political disturbances and international quarrels it seems as if we were all reproached when we think of her quiet, unostentatious life, the nobility and gentleness of her medical work, the lifelong voluntary sacrifice of self for the benefit of others."

Her last public mention was in a 1929 *Chatelaine* article. Dr. Leonora Howard King had died at her country home in Pei-tai-ho (Beidahe) 4 years earlier, at age 74.

References

1. McGuigan D: *The Dangerous Experiment*, University of Michigan, Ann Arbor, Mich, 1973.
2. Maclean D: Letter to the editor. *The Whig* (Kingston, Ont) 1880; Jan. 23.
3. Hunter J: *The Gospel of Gentility*, Yale University Press, New Haven, Conn, 1984.
4. Fairbank JK (ed): *The Missionary Enterprise in China and America*, Harvard University Press, Cambridge, Mass, 1974.